

ARTS-PC



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-FILED-

File No.: 6380430 Date Filed: 9/9/2024

Filing Fee - \$100.00

Certified Copy Fee (Optional) - \$5.00

Note: Corporations may have to pay a minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov/.

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Corporate Name (Contact the California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation in California state board or age authorized to be a corporation and according to be a corporation at the california state board or age and a corporation at the california state board or age and a corporation at the california state board or age and a corporation at the california state board or age and a corporation at the california state board or age at the cal	ornia and if there are any	specific corporate	name styl	e rules.	
The name of the professional corporation is FOCUS PSYC	CHOLOGICAL SERVIO	CE INC., A Psych	nological	Corpo	ration
2 Dusings Address of the	10 20 01 2020		D 76571070 25	121 14	
2. Business Addresses (Enter the complete business addresses		lox or "in care of" an	I		
a. Initial Street Address of Corporation - Do not enter a P.O. Box 20351 SW ACACIA STREET	City (no abbreviations) NEWPORT BEACH,		State CA	Zip Code 92660	
b. Initial Mailing Address of Corporation, if different than item 2a	City (no abbreviations)	City (no abbreviations)		Zip Code	
3. Service of Process (Must provide either Individual OR Corporation	on.)			1	
INDIVIDUAL – Complete Items 3a and 3b only. Must include agent's	full name and California stre	eet address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State Zip Code		de
CORPORATION – Complete Item 3c. Only include the name of the re	egistered agent Corporation	Ki.			
c. California Registered Corporate Agent's Name (if agent is a corporation) – Do	not complete Item 3a or 3b				
GKL CORPORATE/SEARCH, INC.					
4. Shares (Enter the number of shares the corporation is authorized to	to issue. Do not leave blan	k or enter zero (0).)			
This corporation is authorized to issue only one class of shares of stock. The total number of shares which this corporation is authorized to issue is					
Purpose Statement (Contact the California state board or age authorized to be a corporation in California)	ncy that controls your profe a. Go to dca.ca.qov/about	ssion to find out if yo us/entities.shtml for	ur professi more infori	on is nation.)	
The purpose of the corporation is to engage in the profession	on of	PSYCHOLOGY			
and any other lawful activities (other than the banking or		ness) not prohib	ited to a	a corpo	ration
engaging in such profession by applicable laws and regulati the meaning of California Corporations Code section 13400		is a profession	al corpo	ration	within
6. Read and Sign Below (This form must be signed by each inc	corporator.)				
Signature Signature	Joel M. S	imon			
Signature	Type or Prin	Type or Print Name			

Type or Print Name